

FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

PROCESSED

JUN 1 9 2002

THOMSON FINANCIAL Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL					
OMB Number:	3235-0076				
Expires: A	oril 30, 1991				
Estimated avera	ge burden				
hours per respo	nse 16.00				

SEC USE ONLY			
Prefix	Serial		
DATE RE	CEIVED		

Name of Offering (check if this is an amendment and name has	changed, and indicate change.)
THE DANCE OF THE VAMPIRES COMPANY LLC	1175567
Filing Under (Check box(es) that apply): Rule 504 Rule 50	5 ⊠ Rule 506 □ Section 4(6) □ ULOE
Type of Filing: New Filing Amendment	
A. RASIC IDENTIFI	CATION DATA
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has ch	anged, and indicate change.)
The Dance of the Vampires Company LLC	
Address of Executive Offices (Number and Street, City, S c/o 101 Productions Ltd. 260 West 44th Street, Suite 600, New York, Ny	State, Zip Code) Telephone Number (Including Area Code) (212) 575-0828
Address of Principal Business Operations (Number and Street, City, S (if different from Executive Offices)	
Brief Description of Business Production of Broadway promusical work entitled "The	
Type of Business Organization corporation limited partnership, already for	med Sother (please specify): Limited Liabilit;
☐ business trust ☐ limited partnership, to be form	
Actual or Estimated Date of Incorporation or Organization: Montion	Year O 1 Stimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. I	Postal Service abbreviation for State: r other foreign jurisdiction)

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Fallure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless suc exemption is predicated on the filing of a federal notice.

	A. BASIC IDENTI	IFICATION DATA		
2. Enter the information requested for the	following:			
• Each promoter of the issuer, if the	issuer has been organized	d within the past five yes	ars;	
 Each beneficial owner having the po securities of the issuer; 	wer to vote or dispose, o	or direct the vote or dispo	osition of, 10%	or more of a class of equity
Each executive officer and director o	f corporate issuers and o	f corporate general and π	nanaging partne	rs of partnership issuers; and
Each general and managing partner	of partnership issuers.			
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first, if individual)				
DAS Communications Ltd.				
Business or Residence Address (Number	and Street, City, State, 2	Zip Code)		
83 Riverside Drive, New York	k, NY 10024			
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first, if individual)				
Lonepine Limited	•			
Business or Residence Address (Number a	and Street, City, State, 2	Zip Code) c/o DAS (Communicati	lons Ltd.
83 Riverside Drive, New Yor	k, NY 10024			
Check Box(es) that Apply: □ Promoter	☐ Beneficial Owner		☑ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Sonenberg, David A.	·			
Business or Residence Address (Number a	and Street, City, State, 2	Lip Code) c/o DAS (Communicati	ions Ltd.
83 Riverside Drive, New Yor	k. NY 10024			
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☑ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Braunsberg, Andrew				
Business or Residence Address (Number a	and Street, City, State, 2	Lip Code)	**	
Graben 14, Vienna 1010, Aust	tria			
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number a	and Street, City, State, 2	Cip Code)	· · · · · · · · · · · · · · · · · · ·	***************************************
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number a	and Street, City, State, 2	Lip Code)	······································	
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				

Business or Residence Address (Number and Street, City, State, Zip Code)

				B. I	NFORMA	TION AB	OUT OFF	ERING					
l. Has i	the issuer	sold or de	oes the iss	uer intend	to sell to	non-accre	dited inves	tors in thi	s offering	?		Yes	No ⊠
							n 2, if fili						23
2. What	is the mi	nimum inv					individual?	=			• • • • • • ,	. s <u>N</u>	!/A
								•				Yes	No
							• • • • • • • • • • • • • • • • • • • •						
sion o to be list th	or similar r listed is a ne name of	emunerati n associate the broke	on for solic ed person c er or deale	citation of or agent of r. If more	purchasers a broker than five	in connector dealer responses	Il be paid of tion with si egistered w to be liste ealer only.	ales of secu with the SE ed are asso	irities in th C and/or	e offering. with a stat	If a person	n	
Full Name	(Last nar	ne first, if	individua	1)					-				
					N/A								
Business or	r Residenc	e Address	(Number	and Street		ite, Zip Co	ode)					 , ,,, ,,,, ,	·
Name of A	Associated	Broker or	Dealer			·		····		-			
States in W	/high Dags	on Listed	Use Calia	icad on Inc		liait Durch		· . 					
													S. 2. 2.
[AL] [IL]	[AK] [IN]	[AZ] []A]	[AR] [KS]	[CA] [KY]	[CO]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [Ml]	[GA] [MN]	[HI] [MS]	[ID] [MO]	•
(MT)	[NE]	[NV]	(NH)	[NJ]	(NM)	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA	•
[R1]	[SC]	[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	$\{W,Y\}$	[PR]	1
Business or				and Street	, City, Sta	ite, Zip Co	ode)						
	LISOCIATE U	Bloke! Of	Dealer										
States in W	hich Pers	on Listed	Has Solic	ited or Int	ends to Sc	licit Purch	nasers						
			k individu									□ All S	
[AL]	[AK]	(AZ)	[AR]	[CA]	[CO]	(CT)	(DE)	[DC]	[FL]	{GA}	(HI)	[ID	
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[W]	[WY]	[PR	
Full Name	(Last nan	ne first, if	individual	l)									
Business or	Residence	e Address	(Number	and Street	. City. Su	ite. Zip Co	ode)		-				
	••••		•		,,,	,	,						
	ssociated	Broker or	Dealer	. ,	<u> </u>				-				
Name of A			Has Solice	ited or Int	ends to So	bicit Purch	nasers		·				
	hich Pers	on Listed	1143 30110										
States in W								• • • • • • • • • •					States
States in W (Check " [AL]	'All States	or chec	k individu [AR]	al States) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(ні)	[ID	1
States in W	'All States	or chec	k individu	al States)					[FL] [MI] [OH]	[GA] [MN] [OK]	(HI) (MS) (OR)		1

_	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PE	ROCEEDS		
1	. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		ggregate ering Price	Am	ount Already Sold
	Debt	S	0	S	0
	Equity	S	0	s_	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	s	0	s_	0
	Partnership Interests			s	0
	Other (Specify Limited Liability Company Interests)	<u>s 13</u>	,000,000	2	0
	Total				
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number nvestors	Dol	Aggregate llar Amount Purchases
	Accredited Investors			s	0
	Non-accredited Investors			S	0
	Total (for filings under Rule 504 only)			S	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	-	.	5-1	.
	Type of offering		Type of Security	DOI	lar Amount Sold
	Rule 505	_		S	N/A
	Regulation A			s	N/A
	Rule 504			s	N/A
	Total			S _	N/A
٤.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future confingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees		🗅	S_	0
	Printing and Engraving Costs		⊠	s_ _	1,500
	Legal Fees	• • • • •	⊠	<u>s_3</u>	3,000
	Accounting Fees		⊠	S_	2,500
	Engineering Fees		🗖	S	0

S 37,000 ■

Sales Commissions (specify finders' fees separately).....

Other Expenses (identify) ___

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPE	ENSES AND USE	OF PROCEED	S	
	b. Enter the difference between the aggregate offering price given in response tion 1 and total expenses furnished in response to Part C - Question 4.a. The "adjusted gross proceeds to the issuer."	is difference is th	:	\$ <u>12</u>	,963,000
	Indicate below the amount of the adjusted gross proceeds to the issuer used used for each of the purposes shown. If the amount for any purpose is not lestimate and check the box to the left of the estimate. The total of the payment the adjusted gross proceeds to the issuer set forth in response to Part C - Qu	known, furnish at is listed must equa	1 !		
	·*		Payments to Officers, Directors, & Affiliates	Pa	lyments To Others
	Salaries and fees		0	⊠ \$	67.000
	Purchase of real estate	D	0	D \$	0
	Purchase, rental or leasing and installation of machinery and equipment		0	O \$	0
	Construction or leasing of plant buildings and facilities		0	□ s	0
	Acquisition of other businesses (including the value of securities involved offering that may be used in exchange for the assets or securities of anotissuer pursuant to a merger)	ther	0	□ s_	0
	Repayment of indebtedness	🗅 :	0	□ s_	0
	Working capital		00	\boxtimes s $\frac{1}{2}$	2,896,000
	Other (specify):		0	D \$	0
			0	D \$	0
	Column Totals		0	⊠ \$ <u>1</u> 2	2,963,000
	Total Payments Listed (column totals added)				<u>)0</u>
	D. FEDERAL SIGNATUR	Œ			
ollo	issuer has duly caused this notice to be signed by the undersigned duly authousing signature constitutes an undertaking by the issuer to furnish to the U.S. at of its staff, the information furnished by the issuer to any non-accredited	orized person. If a	change Commis	sion, upo	n written re-
SSU	The Dance of the Vampires Company LLC	Poeley	The Date	5/16/	′02
AS	ne of Signer (Print or Type) S Communications, Ltd. David A. Sonenberg Title of Signer (Print or Type) President of Ma		er		

	E. STATE SIGN	LATURE	
I. Is any party described in 17 CFR 230.252 of such rule?	L(c), (d), (e) or (f) present		he disqualification provisions Yes No
S	ee Appendix, Column 5,		and goer
2. The undersigned issuer hereby undertakes Form D (17 CFR 239.500) at such times (to furnish to any state ad as required by state law.	lministrator of any st	ate in which this notice is filed, a notice on
3. The undersigned issuer hereby undertakes issuer to offerees.	to furnish to the state add	ministrators, upo n wr	itten request, information furnished by the
4. The undersigned issuer represents that the limited Offering Exemption (ULOE) of the of this exemption has the burden of establishments.	e state in which this notice	e is filed and understa	nds that the issuer claiming the availability
The issuer has read this notification and knows undersigned duly authorized person.	the contents to be true a	and has duly caused the	nis notice to be signed on its behalf by the
ssuer (Print or Type) The Dance of the Vampires Company LLC	Signature	e ceea	Date 5/16/02
Name (Print or lype) DAS Communications, Ltd. By: David A. Sonenberg	Title (Print or Ty President	of Managing	1ember

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.